

GUILDFORD RURAL DISTRICT

ANNUAL REPORT

— OF THE —

MEDICAL OFFICER OF HEALTH

For the Year

1 9 4 4

Together with the Annual Report
of the Sanitary Inspector



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Guildford Rural District Council

STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health :

*J. E. HAINE, M.B., Ch.B., D.P.H.

Assistant Medical Officer of Health for Diphtheria Immunisation (part-time) :

*NORA JOHNS, M.B., B.S. (Lond.), M.R.C.S., L.R.C.P.

Sanitary Engineer and Surveyor

AND

Chief Sanitary Inspector :

J. W. WILTON, F.S.I., M.Inst.M. & Cy.E.

District Sanitary Inspectors :

No. 1 District :

E. A. SMITH, M.S.I.A., A.R.San.I., A.Inst.S.E.
Cert. S.I.B., R.S.I. Cert. for Meat Inspection, R.S.I. Cert. for Hygiene and Sanitation.

No. 2 District :

G. H. C. TAYLOR, M.R.I.P.H., A.R.San.I.

On Military Service : *District Sanitary Inspector*

K. H. LYNAS, M.S.I.A., A.R.San.I.,
Cert. S.I.B., R.S.I. Cert. for Meat Inspection, R.S.I. Cert. for Smoke Inspectors.

Assistant for Civil Defence Casualty Services :

*R. D. HEATH.

Clerical Staff :

Health Department :

Chief Clerk *C. B. STUART (On Military Service).

Acting Chief Clerk *Miss M. E. NUNN.

*Miss D. STUART.

*Miss S. A. SINCLAIR.

*Miss L. M. JAGGARD.

Voluntary Workers
(part-time)

{ *Mrs. B. GUINNESS.

{ *Mrs. SLOANE-STANLEY.

Surveyor and Chief Sanitary Inspector's Department :

Mrs. G. LEE.

Miss B. GILBEY.

Miss E. SHEPPARD.

* Also acts in similar capacity for the Hambledon Rural District and Haslemere Urban District.

Guildford Rural District Council

PUBLIC HEALTH DEPARTMENT,
MILLMEAD HOUSE,
GUILDFORD.

June, 1945

*To the Chairman and Members of the Guildford Rural
District Council.*

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report on the health of the District for the year 1944.

It is noteworthy that despite five years of war the general health has remained extremely good. The birth-rate has continued to increase and is higher than at any time since 1925. Infant mortality and maternal mortality have declined, and over the whole country the births have been within 1 per cent. of full replacement. Infectious disease has been much less than expected, and no serious epidemics have occurred.

Housing and main drainage schemes are the most serious and most urgent problems to be faced as soon as conditions permit. During the war years housing has steadily deteriorated, whilst the population has continued to increase.

The work and scope of the department has increased very much during the war years, and there is no sign that it is likely to diminish during the post-war period.

I desire to express my thanks to all members of the Council for their sympathy and assistance during a particularly difficult year, and to record my gratitude to all members of the staff for their ungrudging assistance.

Yours faithfully,

J. E. HAINE,
Medical Officer of Health.

STATISTICS & SOCIAL CONDITIONS OF THE AREA

SUMMARY.

	1944	1943
Area in Acres	59,782	59,782
Estimated resident population in July (estimate supplied by Registrar-General) ...	37,880	37,690
Number of Inhabited Houses (May) according to Rate Books	10,744	10,742
Rateable Value	£322,025	£319,058
A sum represented by a Penny Rate (estimated)	£1,327	£1,317
Number of Births (legitimate and illegitimate)	746	688
Birth-Rate per 1,000 of the population	19.69	18.26
Number of Still Births	—	—
Number of Deaths	434	435
Death-Rate (actual) per 1,000 of the population	11.46	11.54
Natural increase of population during year by excess of births over deaths	312	253
Number of Deaths of Infants (under the age of one year)	25	32
Infant Mortality per 1,000 live births	33.51	46.57
Number of women dying in, or in consequence of, child-birth	3	2
Death-Rate from Influenza per 1,000 of the population	0.13	0.24
Death-Rate from Pneumonia (all forms) per 1,000 of the population	0.48	0.66
Death-Rate from Bronchitis per 1,000 of the population	0.58	0.82
Death-Rate from Measles per 1,000 of the population	0.00	0.00
Death-Rate from the seven principal zymotic diseases: Smallpox, Whooping-cough, Measles, Diarrhœa, Diphtheria, Scarlet Fever and "Fever" (Typhoid, Enteric and Typhus), per 1,000 of the population	0.13	0.13
Death-Rate from Diarrhœa and Enteritis of children under two years of age per 1,000 births	5.35	7.28
Death-Rate from all forms of Tuberculosis per 1,000 of the population	0.24	0.56
Death-Rate from Cancer per 1,000 of the population	1.98	2.43
Death-Rate from Heart Disease per 1,000 of the population	2.64	2.34
Death-Rate from Acute and Chronic Nephritis per 1,000 of the population	0.45	0.21

SOCIAL CONDITIONS.

As a result of the war social conditions have altered somewhat, mainly through the establishment of war-time industries and the influx of people from London and other large towns.

There has been, generally speaking, a deterioration in housing and living conditions. Families are thrown together in a way undreamed of in former years, and in many cases are living under conditions of extreme difficulty in unsatisfactory premises, or in rooms as lodgers under conditions in every way unsatisfactory.

Some anxiety is felt over the conditions under which many tubercular patients are obliged to live. It is seldom possible to secure suitable living conditions, and the risks of infection must be considerably increased. These conditions also affect the spread of other infectious diseases, since isolation at home is seldom possible. Difficulties with drainage and sanitation have multiplied as a result of the increased population.

VITAL STATISTICS

BIRTHS.

746 live births were registered during the year, as against 688 in 1943, an increase of 58.

Live Births :	Male.	Female.	Total.
Legitimate	354	323	677
Illegitimate	36	33	69
	<u>390</u>	<u>356</u>	<u>746</u>

BIRTH-RATE per 1,000 of the estimated resident population, 19.69.

The birth-rate for 1943 was 18.26. The 1944 rate thus shows a decided increase.

The graph on page 11 shows the birth-rate for the District for the last 14 years, together with the birth-rates for England and Wales.

There were 21 still-births during the year, as against 17 in 1943.

Still Births :	Male.	Female.	Total.
Legitimate	7	8	15
Illegitimate... ..	3	3	6
	<u>10</u>	<u>11</u>	<u>21</u>

STILL-BIRTH RATE per 1,000 total (live and still) births, 27.37.

DEATHS.

There were 434 deaths registered during 1944 (220 male and 214 female,) as against 435 for the previous year. Table II on page 10 shows the principal causes of death.

DEATH-RATE per 1,000 of the estimated resident population, 11.46.

The preparation and issue of the Registrar-General's comparability factors has been suspended under war conditions.

The death-rate for 1943 was 11.54.

The death-rates per 1,000 of the population for the last 14 years, together with the death-rates for England and Wales, are shown in the graph on page 11.

The 1944 death-rates of certain specified diseases are set out in the Summary on page 12, together with the rates for 1943.

INFANT MORTALITY.

During 1944 there were 25 deaths of infants under one year of age, as compared with 32 in 1943.

	Male.	Female.	Total.
Legitimate	14	8	22
Illegitimate	3	—	3
	—	—	—
	17	8	25
	—	—	—

INFANT MORTALITY RATES.

	1944	1943
All infants per 1,000 live births	33.51	46.37
Legitimate infants per 1,000 legitimate live births	32.50	45.59
Illegitimate infants per 1,000 illegitimate live births	44.93	58.82
Deaths from measles (all ages)	0	0
„ whooping-cough (all ages)...	1	0
„ diarrhoea under 2 years of age)	4	5

MATERNAL MORTALITY.

Rate per 1,000
total (live and
still) Births.

Deaths from puerperal and post-abortion sepsis	1	1.30
Deaths from other maternal causes...	2	2.61
	3	3.91

In 1943 there were 2 deaths from puerperal causes.

Table I shows the birth and death-rates per 1,000 of the population for the District, and for England and Wales, for 1944 and 1943.

TABLE I. COMPARATIVE BIRTH- AND DEATH-RATES.

	Annual Rates per 1,000 of the Population.				Infantile Mortality per 1,000 live births		Maternal Mortality per 1,000 total births	
	Birth-Rate		Death-Rate					
	1944	1943	1944	1943	1944	1943	1944	1943
Guildford R.D.	19.69	18.26	11.46 crude	11.54 crude	33.51	46.57	3.91	2.84
England and Wales	17.6	16.5	11.6	12.1	46*	49	1.93	2.29

* Per 1,000 related births.

Table III on page 12 shows the birth-rates, death-rates, and analysis of mortality for certain diseases during 1944 in respect of England and Wales, London, and the Guildford Rural District.

TABLE II.—CAUSES OF DEATH (ALL AGES).
(Figures supplied by Registrar-General.)

Cause of Death		Male	Female	Total
1.	Typhoid and paratyphoid fevers ...	—	—	—
2.	Cerebro-spinal fever	1	—	1
3.	Scarlet Fever	—	—	—
4.	Whooping-cough	1	—	1
5.	Diphtheria	—	—	—
6.	Tuberculosis of the respiratory system	5	4	9
7.	Other forms of tuberculosis	—	—	—
8.	Syphilitic diseases	3	2	5
9.	Influenza	3	2	5
10.	Measles	—	—	—
11.	Acute polio-myelitis and polio- encephalitis	—	—	—
12.	Acute infective encephalitis ...	—	—	—
13.	Cancer of B. cav. and œsoph. (m), uterus (f)	5	8	13
14.	Cancer of stomach and duodenum	8	2	10
15.	Cancer of breast	—	6	6
16.	Cancer of all other sites	29	17	46
17.	Diabetes	—	5	5
18.	Intra-cran : vasc : lesions	17	26	43
19.	Heart disease	56	44	100
20.	Other diseases of circulatory system	11	10	21
21.	Bronchitis	9	13	22
22.	Pneumonia	9	9	18
23.	Other respiratory diseases	4	3	7
24.	Ulcer of stomach or duodenum ...	3	—	3
25.	Diarrhœa under 2 years	1	3	4
26.	Appendicitis	—	1	1
27.	Other digestive diseases	4	10	14
28.	Nephritis	10	7	17
29.	Puerperal and post-abort. sepsis ...	—	1	1
30.	Other maternal causes	—	2	2
31.	Premature birth	5	5	10
32.	Congenital malformations, birth injury, infant disease	6	2	8
33.	Suicide	—	1	1
34.	Road traffic accidents	4	1	5
35.	Other violent causes	4	13	17
36.	All other causes	22	17	39
All Causes		220	214	434

GRAPH SHOWING BIRTH AND DEATH RATES PER 1,000 OF THE POPULATION.

Guildford R.D. England & Wales.

Births ----- _____

Deaths ===== =====

Extension of
District 1.4.33. ‡ = Guildford R.D. Death Rate after
correction by the Registrar-
General's Comparability Factor.

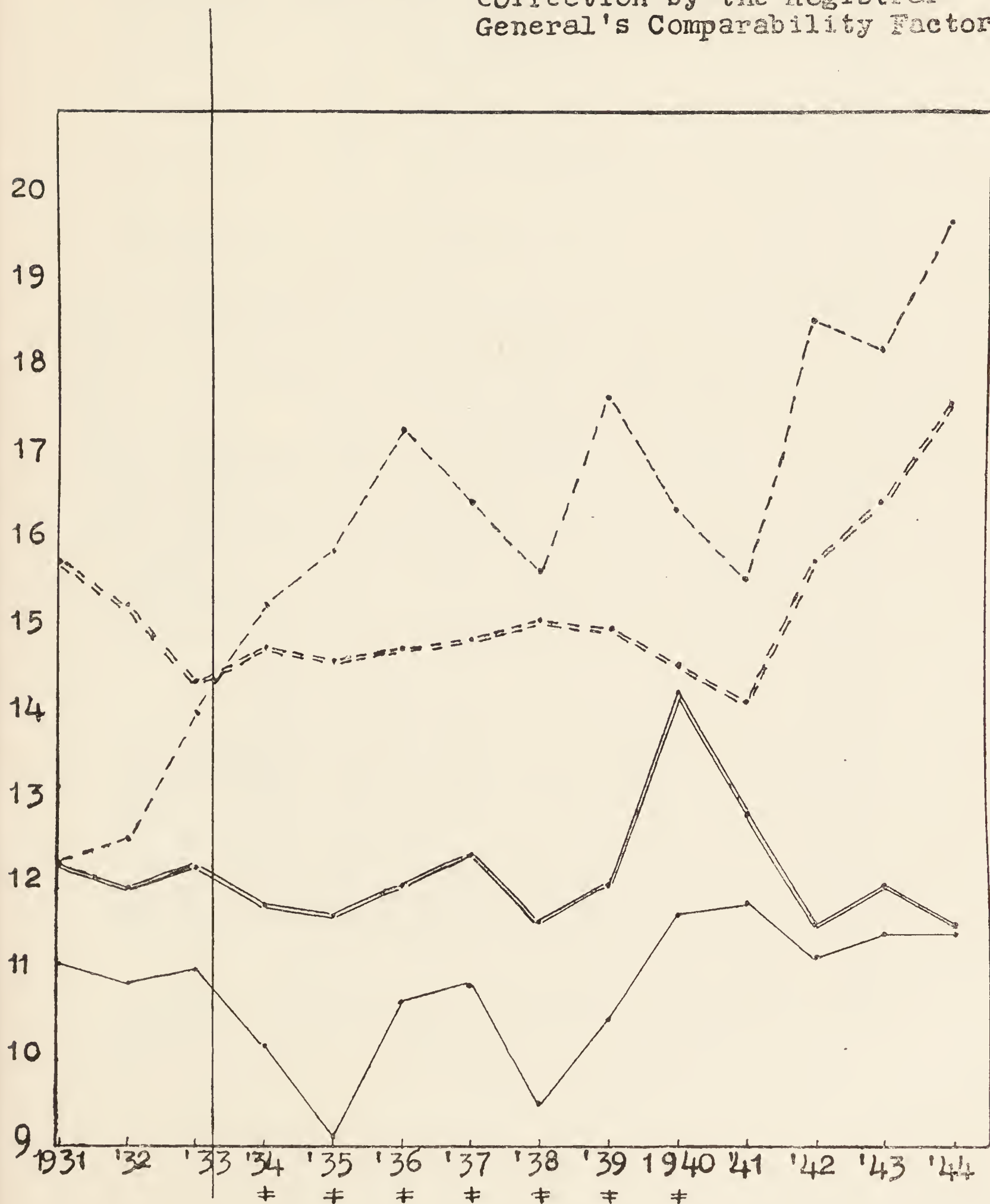


TABLE III.

BIRTH-RATES, DEATH-RATES AND ANALYSIS OF MORTALITY DURING THE YEAR 1944.

	RATE PER 1,000 TOTAL POPULATION		ANNUAL DEATH-RATE PER 1,000 POPULATION								RATE PER 1,000 LIVE BIRTHS	
	Live Births	Still Births	All Causes	Typhoid and Paratyphoid Fevers	Smallpox	Measles	Scarlet Fever	Whooping-cough	Diphtheria	Influenza	Deaths from Diarrhoea & Enteritis (under 2 years)	Total Deaths under One year
England and Wales ...	17.6	0.50	11.6	0.00	0.00	0.01	0.00	0.03	0.02	0.12	4.8	46*
126 County Boroughs and Great Towns, including London ...	20.3	0.64	13.7	0.00	—	0.01	0.00	0.03	0.03	0.10	7.3	52
148 Smaller Towns (Estimated Resident populations 25,000 to 50,000 at Census 1931) ...	20.9	0.61	12.4	0.00	—	0.01	0.00	0.02	0.03	0.11	4.4	44
London ...	15.0	0.42	15.7	0.00	—	0.00	0.00	0.04	0.01	0.08	10.1	61
Guildford R.D. ...	19.69	0.56	11.5 (act'l)	0.00	—	0.00	0.00	0.03	—	0.13	5.4	33

*Per 1,000 related Births.

GENERAL PROVISION OF HEALTH SERVICES
FOR THE AREA

LABORATORY FACILITIES.

Pathological Examinations.—Most of the routine examinations are still conducted by the Royal Surrey County Hospital, and the arrangement works very satisfactorily.

The following are details of examinations carried out during the year :

							1944	1943
Diphtheria	...	...	...	...	...	...	54	69
Scarlet Fever	...	...	...	...	...	...	53	125
Tuberculosis	...	...	...	...	...	...	13	21
Fæces ...	...	...	...	...	...	...	3	2
Miscellaneous	...	...	...	...	...	...	4	10
							127	227

The Emergency Public Health Laboratory at Christ's Hospital, Horsham, has undertaken a number of special investigations, particularly with regard to outbreaks of infectious disease in institutions. The help given by this service has been invaluable.

Milk Analysis.—During the year 92 samples were examined. This work is carried out by the Pathological Department of the Royal Surrey County Hospital, Guildford.

Water Analysis.—The Counties Public Health Laboratories continue to undertake the examination (both chemical and bacteriological), by contract, of samples of water.

AMBULANCE FACILITIES.

Particulars are given below of the ambulance services operating in the District :

(i) Ambulances available for the conveyance of cases of Infectious Disease :

Name of Authority	No. of Ambulances	Address of Ambulance Station	Telephone Number
Farnham Joint Isolation Hospital Committee.	2	1 at Farnham Isolation Hospital. 1 at Heath & Wiltshire's Garage, Farnham.	Farnham 6015
Ottershaw Joint Hospital Board.	2	Ottershaw Isolation Hospital.	Ottershaw 30

(ii) Ambulances for the conveyance of cases of Non-Infectious character.

The District is dependent mainly upon ambulances provided by the Voluntary Associations at Guildford and at Farnham.

The Civil Defence ambulances at Ash First Aid Post and Depot have been used during the past four or five years to a considerable extent for emergency cases. This was referred to in my Annual Report for 1943. With the closure of the Post at the end of this year, it was felt that considerable hardship would be caused if this ambulance service ceased entirely. Arrangements were therefore made with the British Red Cross Society to continue for a period of three months' trial in order to test the needs of the locality. An ex-Civil Defence ambulance was allocated for this purpose and satisfactory arrangements made for staffing and administration. This ambulance is not suitable for permanent service, but it should serve as a test and can be replaced by a more appropriate vehicle if it is decided that a permanent ambulance service ought to be established at Ash.

The temporary service is entirely voluntary, and is, of course, under the necessity of taking all cases and not merely emergencies.

The British Red Cross Society have decided to make no charge whatever, but to provide an entirely free service. This is a principle that appears to be most commendable, and might well be copied by other similar services.

The voluntary ambulance service at Holbrook House Civil Defence Depot, Shalford, for conveying patients to and from Sick Bays, has continued to give excellent service. 285 patients were conveyed during the year, and 6,857 miles covered.

Volunteer Car Pool.—This scheme has been used very considerably during the year. It has undoubtedly eased the burden on the ambulance services generally, and has been of enormous

benefit to patients who otherwise might have been debarred from receiving essential treatment or been obliged to travel under conditions injurious to their state of health.

During the year I have authorised 180 journeys, which, of course, cover medical purposes only.

The service has been greatly appreciated, not only by the patients who benefited directly, but also by the hospitals and by doctors in charge of the patients. With the return to normal conditions this service will inevitably be withdrawn. It is hoped that some similar form of voluntary service may be found in substitution, as it is work that the British Red Cross Society or the St. John Ambulance Brigade might well consider undertaking in a District such as this, where patients frequently live in isolated rural localities.

The service provides a very real need and has proved of very great value. There will inevitably be difficulties and hardship when it ceases to function.

NURSING IN THE HOME.

Midwives.—There are 16 Midwives practising in the Rural District supervised by the County Medical Officer of Health. They are distributed in the following parishes :

Albury	1	Puttenham	—
Artington	—	Ripley	2
Ash and Normandy ...	2	St. Martha	—
Clandon, East	—	Seale	2
Clandon, West	1	Send	1
Compton	1	Shackleford	1
Effingham	—	Shalford	1
Horsley, East	—	Shere	1
Horsley, West	1	Wanborough	—
Ockham	—	Wisley	—
Pirbright	—	Worplesdon	1

District Nurses.—District Nurses are available in every parish. This service is administered by the County Nursing Association.

Health Visitors.—County Health Visitors visit homes under the School Medical and Maternity and Child Welfare Services. There are 10 Health Visitors, distributed in the following districts : (a) Pirbright ; (b) Send ; (c) Ash, Normandy and Seale ; (d) Tongham ; (e) Artington, Compton, Puttenham, Shackleford, Wanborough and Worplesdon ; (f) Albury, St. Martha, Shalford and Shere ; (g) Holmbury St. Mary, Gomshall ; (h) East and West Clandon, East and West Horsley, Ockham and Wisley ; (i) Ripley ; (j) Effingham.

Home Nursing for Public Assistance Cases.—The scheme for the Home Nursing of Public Assistance Cases formulated in 1933 is operated by the Surrey County Council.

CLINICS AND TREATMENT CENTRES.

Maternity and Child Welfare.—Centres within the District are as set out in the table below :

Centre	Address	Days of Centre
Ash	St. Peter's Church Room (Opposite Ash Church)	Every Thursday
Ash Vale	Newton's Cycle Shop, Ash Vale	2nd and 4th Mondays
Ash Wyke ...	The Village Hall, Normandy	1st and 3rd Mondays
Effingham... ..	Women's Institute, Effingham	1st and 3rd Tuesdays
Horsley, West ...	Village Hall, West Horsley ...	1st and 3rd Thursdays
Peaslake	Old School Room, Peaslake ...	2nd and 4th Mondays
Puttenham ...	Old School Room, Puttenham	1st and 3rd Tuesdays
Ripley	Church Hall, Ripley	2nd, 4th and 5th Thursdays
Send	Men's Institute, Send	1st and 3rd Mondays
Shere	Village Hall, Shere	1st and 3rd Thursdays
Shalford	The Institute, Off King's Road, Shalford	Every Wednesday
Wood Street ...	Church Hall, Wood Street ...	2nd and 4th Thursdays
Worplesdon ...	Memorial Hall, Perry Hill ...	2nd and 4th Wednesdays

In addition there is a voluntary Infant Welfare Centre held at Holmbury St. Mary. This centre is run by a local committee, and a doctor and nurse are provided by the County Council by arrangement. The centre is held at the Holly Bush, Holmbury St. Mary, on the 2nd and 4th Fridays of the month.

A request was received from the people of Tongham that a Maternity and Child Welfare Clinic should be opened in the village. The nearest Clinic is at Ash, some three miles distant, and there is no distribution centre for orange juice and similar products nearer than Ash or Seale. The number of children under 5 years is estimated at 60 or 70, and the average annual number of births is 15. Suitable accommodation was offered and the request forwarded to the County Council for consideration.

Ante-Natal Clinics.—Clinics serving the District are held as follows :

Ash	2nd and 4th Tuesdays at 2 p.m.
Godalming	1st and 3rd Tuesdays, 9.30 a.m.
Farnham ("Brightwells") ...	Wednesdays at 2 p.m.
Woking Maternity Home, Heathside Road, Woking.	Every Friday at 10 a.m., 2nd and 4th Wednesdays at 2 p.m. and 2nd Monday at 10 a.m.

Orthopædic Clinic.—The Orthopædic Clinic is held at the Royal Surrey County Hospital, Farnham Road, Guildford, on Tuesday afternoons at 1.30 p.m. In-patient treatment is provided at the St. Nicholas and St. Martin's Homes at Pyrford, and Out-patient treatment on Thursday mornings at 11 a.m.

Tuberculosis Dispensary.—The Tuberculosis Dispensary was at 49 Farnham Road, Guildford, until the 2nd October. Days and times for the attendance of the patients are as follows :

Every Monday afternoon	... ..	2 p.m.
Fridays	... ..	2 p.m.
Alternate Wednesday mornings	... ..	10 a.m.
Wednesdays (2nd and 4th in the month)	... ..	5.30 p.m.

Summer Months only.

From the 2nd October, at Tower House, Epsom Road, Guildford :

Mondays	... ..	2-4 p.m.
Wednesdays	... ..	2-4 p.m.
Fridays	... ..	10-12 noon.

Venereal Diseases Clinic.—A Clinic is held at the Royal Surrey County Hospital, Guildford, four days weekly, as follows :

Mondays (Females)	... ..	2 p.m.
Thursdays (Females)	... ..	9.30 a.m.
Thursdays (Males)	... ..	5 p.m.
Fridays (Males)	... ..	5 p.m.

Birth Control.—The Birth Control Clinic at the Warren Road Hospital, Guildford, is held every 1st and 2nd Wednesday in the month at 10 a.m., and is administered by a Voluntary Committee.

The Clinics mentioned above are all administered by and under the control of the Surrey County Council, except where it is otherwise stated.

HOSPITALS.

The hospitals serving the District are as follows :

County Warren Road Hospital, Guildford, 627 beds.

Council : Farnham County Hospital, Hale Road, Farnham, 210 beds.

Voluntary : Royal Surrey County Hospital, Guildford (including Merrow Grange Auxiliary Hospital), 400-450 beds.

Infectious Clandon Smallpox Isolation Hospital, 37 beds.

Disease : Ottershaw Isolation Hospital, 70 beds.

Farnham Isolation Hospital, 48 beds.

Guildford and Godalming Joint Isolation Hospital.—This hospital was closed during 1940. On account of its situation and approach it was felt that patients might be exposed to excessive

risk, especially in the event of aerial attacks. Despite the loss of these 81 beds the needs of the District have been met. The Ottershaw Isolation Hospital (66 beds) normally takes all patients from the Guildford Rural District, and has reciprocal arrangements with other infectious diseases hospitals in the County for mutual help. The Ottershaw Hospital is some 11 or 12 miles north of Guildford, but despite the considerable distances from the more remote parts of the District no serious difficulties have been experienced.

The accommodation provided has not at all times been adequate, but the reciprocal arrangements with other hospitals have been sufficient to meet all cases. At the same time it should be noted that there has been no severe test, such as an epidemic of infectious disease requiring extensive hospitalisation. In such circumstances there would be very serious difficulties, aggravated by the impossibility of securing isolation at home under present conditions.

The Sick Bays have contributed in no small measure to relieving the strain on Isolation Hospitals. They have accommodated the vast majority of infectious cases from residential nurseries and similar institutions which otherwise would have required removal to the Isolation Hospital. They have also been able to admit many cases of minor infectious disease from private homes and have contributed materially to the prevention of spread of infection.

Evacuation Sick Bays.—Only one Sick Bay is within the Guildford Rural District, and this was transferred from Boughton Hall, Send, to Millwater House, Ockham, in June of this year. The new premises give approximately the same accommodation, enabling 27 cases to be accommodated, although it is less conveniently arranged and requires larger staff, both nursing and domestic.

The number of cases admitted during the year were :

Sonné Dysentery/Whooping-cough/Chicken-pox	1	Whooping-cough/Pneumonia	1
Sonné Dysentery/Whooping-cough	1	Whooping-cough	67
Sonné Dysentery	2	Chicken-pox	36
Measles	1	Hyper pyrexia/Chicken-pox	1
German Measles	6	Gastro Enteritis	2
Chicken-pox/Mumps	1	Abscess of face	1
Infective Jaundice	1		
Mumps	2	Total	123

The average stay in the Sick Bay is 35 days.

In the three Districts for which I am Medical Officer of Health there are four Sick Bays, and since all are operated in close collaboration they must be considered as branches of one single service. A brief account of their work since the commencement of the Sick Bays is appended, being in the main excerpts from a report

submitted in November and forwarded to the Ministry of Health with a plea that Sick Bays should be retained, at any rate in part, during the post-war period. They will assist materially in the prevention of spread of minor epidemic disease during the period when all housing accommodation is occupied to the full. They will relieve the pressure on Isolation Hospital accommodation, which is at present considered only just sufficient to meet ordinary requirements, and if the residential nurseries and similar establishments are to continue the retention of Sick Bays is essential.

The number of patients admitted over the whole period is 2,719, practically all of them evacuees. The demand for admission of resident children has been insistent and very difficult to refuse. Conditions under which the resident children are living as regards overcrowding and difficulties of isolation or adequate treatment are exactly the same as those of the evacuees.

All the Sick Bays have admitted children from our own area, and also from adjoining Districts. With the assistance of the British Red Cross Society members, who are also members of the Civil Defence Casualty Service stationed at Shalford, a voluntary transport service was developed for the conveyance of children to Sick Bays. This has worked admirably, and the amount of travelling involved has been very considerable, reaching a peak figure of 2,026 miles during the month of June in 1941.

Practically all houses in the three Districts are now so overcrowded as to prevent any attempt at isolation of infectious or contagious diseases. It is probable that a similar state of affairs will continue for some years after the war. The housing position here is really serious, and the demand for large numbers of new houses urgent and insistent.

It appears, therefore, certain that the same difficulties of isolation and medical treatment will persist until the housing shortage is relieved. Unless it is made possible to remove children from their homes for isolation on account of these minor conditions the risk of spread will be very much increased and extremely difficult to deal with. It is not possible to admit such diseases as chicken-pox, mumps, and whooping-cough to the Isolation Hospital, the accommodation being totally inadequate.

I have shown in the attached tables the increasing use of the Sick Bays by residential nurseries. This has increased and continues to increase to such an extent that it seems the Sick Bay accommodation must become an essential part of any scheme for the provision of residential nurseries. It seems probable that at any rate some of the residential nurseries will be continued after the war, and it follows that Sick Bay accommodation must also be provided.

I am very definitely of the opinion that provision should be made for the continuation of some Sick Bay accommodation after the war. This need not be probably on the same scale as at present, but I suggest that two Sick Bays, each of about 20 beds

—which is the economic minimum for the successful running of a Sick Bay—would probably meet urgent requirements, one of them being reserved for minor infectious diseases, the other for minor ailments, including contagious skin infections.

Year		Boughton Hall and Millwater House	Kilmory	Long Acre	Quedley	Total
1939	Residential					
	NurseryChildren	—	16	1	4	21
	Others	—	57	24	46	127
	Total	—	73	25	50	148
1940	Residential					
	NurseryChildren	14	7	4	30	55
	Others	81	127	138	119	465
	Total	95	134	142	149	520
1941	Residential					
	Nursery Children	37	45	39	68	189
	Others	113	98	107	118	436
	Total	150	143	146	186	625
1942	Residential					
	Nursery Children	53	91	41	55	240
	Others	78	54	42	111	285
	Total	131	145	83	166	525
1943	Residential					
	NurseryChildren	49	60	60	56	225
	Others	48	35	56	87	226
	Total	97	95	116	143	451
1944	Residential					
	NurseryChildren	85	67	29	14	195
	Others	38	48	59	110	255
	Total	123	115	88	124	450

Grand Totals during the war years :						
Residential Nurseries	...	...	...	...	...	925
Others	...	...	...	...	...	1,794
						2,719

Psychiatric Social Worker.—The work of the Psychiatric Social Worker appointed in 1940 under the Evacuation Scheme continued to be of the very greatest value and of assistance, particularly with billeting problems. She has worked in close co-operation with the Evacuation Hostels—Denbigh House, Shalford, for boys, and Pilgrim Wood, Artington, for girls—and

has visited all evacuees where billeting was difficult or where there were psychological problems.

The statistics given below show the numbers of children dealt with from the Guildford Rural District :

**Numbers of children admitted to, and passing through,
Denbigh and Pilgrim Wood, 1944 :**

Denbigh House	...	21	Of these, 4 came from the Guildford Rural District :
			1 observation,
			1 awaiting billet,
			1 difficult and pilfering,
			1 difficult behaviour.
Pilgrim Wood	...	24	Of these, 11 came from the Guildford Rural District :
			1 readmitted following operation,
			1 for enuresis,
			1 for enuresis and backwardness,
			5 clearing-house cases,
			2 from unsuitable billets,
			1 sleep-walker.

Number of cases visited in the Guildford Rural District	22
Number of cases referred to the Child Guidance Clinic	18
Number sent to Hostels (including Denbigh, Pilgrim Wood, and others outside the District)	17

The value of this work has been increasingly apparent, just as the number of cases dealt with has steadily increased.

The Child Guidance Clinic held in Guildford was obliged to increase the number of sessions to three times weekly, and even this was proved scarcely adequate to give sufficient time for treatment in all cases.

Miss Perrott, the Psychiatric Social Worker, resigned in October and her place was taken by Mrs. Hicklin on a temporary basis in the expectation that the County Council, as the Education Authority, would assume responsibility for this service, and that it would become a permanent organisation instead of a temporary Evacuation scheme.

MORTUARIES.

The needs of the District are provided for by two Mortuaries—one at Woking and one at Farnham. The numbers of bodies removed thereto from this District in 1944 were 10 and 14, respectively.

INSULIN.

In accordance with Ministry of Health Circular 2734, a regular supply of insulin is made to one patient who would be otherwise unable to afford it.

INFECTIOUS DISEASES.
TABLE SHOWING NUMBER OF CASES NOTIFIED AND WHERE TREATED.

	Measles	Scarlet Fever	Puerperal Pyrexia	Diphtheria	Whooping-cough	Soné Dysentery	Bacillary Dysentery	Influenzal Pneumonia	Erysipelas	Undulant Fever	Cerebro Spinal Meningitis	Total
Farnham Isolation Hospital	2	11	—	2	—	1	—	—	1	—	1	18
Ottershaw Isolation Hospital	—	25	—	—	1	1	—	—	—	—	—	27
Kilmory Sick Bay	5	—	—	—	—	4	—	—	—	—	—	9
Farnham County Hospital	—	—	—	—	—	1	—	2	—	—	—	3
Military Isolation Hospital, Aldershot	1	1	—	—	—	—	—	—	1	—	—	3
Boughton Sick Bay	—	—	—	—	2	—	—	—	—	—	—	2
Millwater House Sick Bay	—	—	—	—	4	—	—	—	—	—	—	4
Warren Road Hospital	—	—	1	—	—	—	—	1	—	—	—	2
Louise Margaret Hospital	—	—	—	—	—	—	1	—	—	—	—	1
At Home	9	21	1	—	62	6	—	3	5	1	—	108
Total	17	58	2	2	69	13	1	6	7	1	1	177

SANITARY CIRCUMSTANCES OF THE AREA

WATER.

There has been no large extension of public water supplies in the District.

No serious difficulties have arisen, and there has been no serious shortage in any part of the District. The level of the underground water appears to be falling year by year and many of the wells which have served in the more remote parts are showing signs of becoming dry.

Following the White Paper issued by the Government entitled "A National Water Policy," it was felt that there would be considerable advantage in regarding the south-western part of Surrey as one water supply area instead of having, as at present, a very large number of water undertakings of various size, many of them quite small private suppliers. It should be possible to secure co-ordination with possible amalgamation of some of them under a common directorate or possibly a Joint Board. As a preliminary it would be necessary to have an expert survey of the whole area in order to ascertain the potentialities, and proposals to this effect were submitted in a special report to the Council in August, 1944.

All water supplies have been checked systematically during the year, but it has been difficult to maintain the same frequency as in former years on account of the shortage of Sanitary Inspectors and the greater demands on their time. Twenty-five samples were taken for analysis.

DRAINAGE AND SEWERAGE.

The difficulties in those parts of the District where main drainage schemes are required have increased during the year. The cesspool emptying service is not able to cope adequately with requirements, and is handicapped by labour difficulties and the loss of one cesspool emptying machine.

The sewage disposal works at Send have worked satisfactorily and given no cause for anxiety. The effluent is consistently of an exceptionally good standard.

The small disposal plant for the Oxenden Road, Tongham, housing estate is adequate to deal with requirements, and does not require special mention.

The need for the main drainage schemes proposed immediately prior to the war is greater than ever, and it is hoped that they will be given urgent priority as soon as conditions permit. At the same time it may be that the plans will require revision in accord with the latest proposals for Town and Country Planning. It may prove that considerable lengths of sewer will for all time be entirely unproductive on account of the prohibition of building in certain localities.

CLOSET ACCOMMODATION AND PUBLIC CLEANSING.

Reference is made to these matters in the Chief Sanitary Inspector's Report.

ERADICATION OF BED BUGS.

Two houses were fumigated by Associated Fumigators Ltd. during the year.

HOUSING

HOUSING TABLES.

Number of new houses erected during the year :	
(a) Total, including numbers given separately under (b) ...	—
(b) With State Assistance under the Housing Acts :	
(1) By the Local Authority	—
(2) By other persons or bodies	—
1. Inspection of Dwelling Houses during the Year.	
(1) (a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)...	259
(b) Number of inspections made for the purpose... ..	433
(2) (a) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing (Consolidated) Regulations, 1925	—
(b) Number of inspections made for the purpose ...	—
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	—
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation ...	255
2. Remedy of Defects during the Year without service of Formal Notice.	
Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	238
3. Action under Statutory Powers during the Year.	
A.—Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 :	
(1) Number of dwelling houses in respect of which notices were served requiring repairs	2

(2) Number of dwelling houses which were rendered fit after service of formal Notice :	
(a) By owners	1
(b) By Local Authority in default of owners	—
B.—Proceedings under Public Health Acts :	
(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	—
(2) Number of dwelling houses in which defects were remedied after service of Formal Notices :	
(a) By owners	—
(b) By Local Authority in default of owners	—
C.—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :	
(1) Number of dwelling houses in respect of which Demolition Orders were made	—
(2) Numbers of dwelling houses demolished in pursuance of Demolition Orders	—
(3) Number of dwelling houses in respect of which Clearance Orders were made	—
D.—Proceedings under Section 12 of the Housing Act, 1936 :	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	—
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	—

The most acute and urgent problem in this District as in most others at the present day is the shortage of housing accommodation. Conditions have deteriorated considerably during the war, owing to the absence of repairs to houses, the cessation of systematic housing inspections and the continued occupation of old houses which have passed their term of usefulness. At the same time the population has increased substantially, owing to the influx of evacuees and refugees from other areas, and to the establishment of new industries employing large numbers of work-people or the expansion of older established firms producing war materials. Overcrowding is prevalent, although not always according to the legal standard which is generally accepted as very low.

Despite the increased earnings of so many wage earners, standards of housing have fallen. In some cases families endeavour to meet the difficulties of finding accommodation by the erection of shacks, or by the use of sheds or other structures totally unfit for human habitation but providing temporary shelter. There are signs, too, of an increasing use of caravans for permanent residence. It is expected that there will be a considerable increase in this mode of living unless the housing shortage is relieved speedily. Past experience has shown that there are a certain number of people who, having sunk to such a low level of existence, lack the initiative

or enterprise to rise above it, and are content to continue living under conditions of the most primitive or insanitary sort.

Four agricultural cottages were built under the Ministry's scheme, and although they set a new high standard for Council property such a small number could make no difference to the general conditions throughout the District.

It appears that the main problem can be divided into three sections :—

- (1) Provision of new houses in adequate numbers ;
- (2) the repair or re-conditioning of houses deteriorated after five years' lack of attention ; and
- (3) the control or prevention of shacks, sheds, caravans, and similar living conditions likely to be resorted to in increasing numbers.

So long as the present shortage of houses continues it will not be possible to insist upon the demolition of houses which provide shelter of any sort, and many unsatisfactory dwellings will continue to be occupied, although scheduled for demolition at the earliest possible moment.

Although the general unsatisfactory conditions are well-known it is extremely difficult to ascertain the exact requirements of the District in terms of new houses required. Systematic housing surveys have been discontinued, whilst the applications for Council houses are in many cases out-of-date or too old to be of value. In order to assess the needs of the District the Council issued a Housing Enquiry form in March, and some 900 replies were received. This is by no means a complete statement of the requirements, as large numbers of people living in unsatisfactory houses did not complete the form, but it may be taken as being the minimum urgent requirements in terms of new houses.

New houses are required in almost every Parish in the District, although naturally larger numbers are needed in those more populous Parishes, such as Ash and Shalford, where the population is dependent upon industry in adjoining towns rather than on agricultural pursuits.

Sites for new housing development have been selected in the majority of Parishes, and by the end of the year there was general agreement as to the disposition of the 900 houses so urgently needed.

In co-operation with the adjoining Districts a Joint Scheme for the advance preparation of the larger housing sites was agreed to in accordance with the suggestions put forward by the Ministry of Health. It can be expected, therefore, that these sites will be prepared so far as roads and main surfaces are concerned in good time for the start of building operations.

The most urgent cases of re-housing have been met by the re-conditioning of old houses, by the purchase of 47 houses left

incomplete at the outbreak of war and since occupied by the military, and by the application for an allocation of prefabricated temporary bungalows.

The re-conditioning of old houses, such as would have been scheduled for demolition before the war, has provided accommodation speedily in certain cases, although it must be remembered that such re-conditioned houses have a very limited period of usefulness and must be demolished at the earliest possible moment,

The unfinished houses at Tongham are likely to provide the first permanent Council houses under present conditions. They can be completed quickly, since internal work only is required. The Council felt that if left for completion by private enterprise there was no control as to the occupiers to whom they would be let or sold, nor would there be any restriction on the rent likely to be charged. In order to ensure that they were used for the needs of our own District and for families most urgently in need of housing the Council wisely decided to purchase them.

Although not invited to apply for prefabricated bungalows, the Council felt the needs of the District were so urgent that they did make application for 250. It has been learned that 100 will be sent to this District. They are likely to be in occupation a considerable time before it is possible to build permanent houses, and will be divided equally between Ash and Shalford.

The continued erection of shacks and sheds applies mainly in the Parish of Ash and Normandy at present. It has been extremely difficult to keep the Clearance Areas in the Bogs and Quadrant free from such dwellings and from vans or tents. The experiment of transferring the inhabitants of these areas into Council houses has not been entirely satisfactory. A few have been able to adjust themselves to the conditions of living in a decent house. Many of them have not done so, nor have they been able to make serious effort either to live in the ordinary way nor to care for the amenities of a house. With some the necessity for carrying on their occupation, frequently as itinerant vendors of firewood or similar occupation requiring the use of a horse and cart, has not been reasonably possible from a Council house. The general result has been that the Council Housing Estate has been to a great extent spoiled by such people. The general level has been lowered, and the Grange Road Housing Estate, which promised to be one of the best in the whole of the District, has become an eyesore and source of great difficulty through conditions produced by certain of these tenants themselves.

Other ways of dealing with this type of family have been considered. The establishment of controlled camping sites, providing concrete stances for caravans and all necessary amenities, was carefully considered. Such a site must be kept under some measure of control and be subject to rules and regulations and is

unlikely to be a complete success, especially as there is no means of preventing camping for short periods elsewhere.

A further suggestion remains to be investigated more fully, and seems likely to hold more prospect of success—the erection of sub-standard houses providing the minimum necessities for a decent existence on a suitable site where vans can be retained, grazing for horses assured, and space given for the continuance of industries such as log-sawing or general dealers, has been suggested. Accommodation of this sort would be welcomed by those tenants who have proved themselves unfitted to occupy Council houses and unable to adjust their way of living. At the same time it would encourage those who can improve themselves and might eventually enable them to transfer to an ordinary Council house. A suitable site has been found, and it is hoped that it will be possible to pursue this idea with some hopes of solving in great measure one of the most difficult of problems which, despite every effort for many years, has remained insoluble.

Realising the necessity for more careful supervision and management of the Council Housing Estates, the need for ensuring that every Council house is used to the best advantage, and the necessity for careful supervision of the prefabricated bungalows to be erected, the Council appointed a Housing Manager and an Assistant Housing Manager who commenced duties on the 1st December. This innovation has been made with great hopes that it will improve the level of the worst of the Council's Housing Estates, and that it will help to economise in the cost of repairs and decorations. The Housing Manager will also be of great help in the selection of tenants for Council Houses.

As was recommended by the report on "Rural Housing" prepared by a Sub-Committee of the Central Housing Advisory Committee, the Council decided to make a comprehensive survey of housing conditions throughout the whole District as early as possible. Such a survey is indispensable for an accurate assessment of all housing requirements with regard to repairs and re-conditioning as well as new building. Four Assistant Housing Inspectors were appointed for this special purpose, and commenced their duties towards the end of the year. The survey should be completed in about 12 months. The results will form the basis for a continuous record of every house, which will be continued by the normal routine housing inspection of the Sanitary Inspectors when normal conditions return.

The appointment of a Surrey Joint Advisory Housing Committee was agreed to, and it is understood that all Rural Districts in the County will proceed almost at once with such a survey, adopting the same standards and the same procedure. This uniformity will be of great advantage, and is most desirable from every point of view.

The Council's programme for the first and second year when it is possible to build houses is set out below, as also the list of housing sites selected :

Site.	No. of Houses.	
	1st Year.	2nd Year.
Norwood Close, Effingham	6	—
Farley Close, West Horsley	10	—
Towerhill, Shere	14	—
Drodges Close, Shalford	6	—
Wharf Field, Send	6	—
New House Farm, Wood Street	30	70
Georgelands, Ripley	10	—
Georgelands—Additional land	6	—
Grandis Cottages, Ripley	2	—
The Sands, Seale	4	—
The Cardinals, Tongham	12	—
College Road, Ash	12	—
Walden Cottages, Normandy	30	—
Glebe Cottages, West Clandon	12	—
Quarry Cottages, Hurtmore	18	—
Long Acre, Ash	50	70
Manor Cottages, Ash	—	6
Wharf Lane, Send (new site)	6	—
Shalford	20	—
Ripley and other sites	—	100
Totals	254	246

One of the greatest difficulties is likely to be connected with sewage disposal. The policy of cesspools for considerable groups of houses is most unsatisfactory, and it is hoped that small sewage disposal schemes will be incorporated with every estate until such time as main drainage becomes available.

INSPECTION AND SUPERVISION OF FOOD

MILK SUPPLY.

There are, in the Guildford Rural District, 72 producers of ordinary milk, 14 producers of Tuberculin Tested milk, and 62 producers of Accredited milk under licence from the County Council.

There are only two pasteurising plants licensed within the District, although pasteurised milk is sold by 14 retailers under Supplementary Licences authorising the sale of such milk properly pasteurised.

The quality of milk produced in this District has been maintained remarkably well despite the difficulties of war years. At the same time it has been noticed that the number of cattle slaughtered for tuberculosis has tended to increase.

SHORT PARTICULARS OF MILK SAMPLING FOR THE YEARS 1941, 1942, 1943, 1944.

ANALYSES RESULTS.

Year	Number Samples Taken	Bacterial count				Coliform Bacillus				T.B.		Cattle Slaughtered
		Under 10,000 per ml.	10,000 to 50,000	50,000 to 200,000	200,000 and over	Absent on all counts	in 1/10	in 1/100	in 1/1,000	Positive	Negative	
1941	Designated 75 } Undesignated 59 }	50	60	17	6	97	25	7	6	3	131	1
1942	Designated 120 } Undesignated 110 }	95	101	31	3	170	50	23	8	7	223	2
1943	Designated 111 } Undesignated 76 }	48	62	52	25	130	23	16	6	6	181	1
1944	Designated 58 } Undesignated 34 }	23	26	25	3	65	10	5	1	—	43	9

WATERCRESS BEDS.

The watercress beds at Gomshall have been kept under careful observation during the year and analyses made of the water from time to time.

MEAT.

Under war-time regulations the central abattoir in the Guildford Borough is used for all slaughtering.

ANTHRAX.

One case of suspected anthrax was reported during the year.

FOOD AND DRUGS (ADULTERATION) ACT, 1938.

This Act is administered by the Surrey County Council, and I am indebted to the County Medical Officer of Health for the information in Table IV below, which shows the number of samples analysed, and action taken in respect of this District, during 1944.

TABLE IV.

RETURN OF SAMPLES ANALYSED DURING YEAR ENDED
31st DECEMBER, 1944.

Articles	Analysed			Adulterated or Deteriorated			Prosecu- tions	Convic- tions
	For- mal	In- formal	Total	For- mal	In- formal	Total		
Milk	128	9	137	9	2	11	2	2
Cream	—	—	—	—	—	—	—	—
Cheese	—	—	—	—	—	—	—	—
Lard	—	—	—	—	—	—	—	—
Sugar	—	—	—	—	—	—	—	—
Butter	—	—	—	—	—	—	—	—
Gelatine	2	—	2	—	—	—	—	—
Totals	130	9	139	9	2	11	2	2

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

GENERAL.

The total number of cases notified during the year was 178. This compares with 629 in the previous year. The reduction is due almost entirely to the absence of any epidemic, such as measles in 1943 which accounted for 450 of the notifications.

The following table shows the decrease or increase in each of the notifiable diseases :

Disease	1944	1943*	1944 Increase + Decrease —
Smallpox	—	—	0
Scarlet Fever	58	81 (82)	—23
Diphtheria	2	2	0
Enteric Fever (including Paratyphoid)	—	1	— 1
Puerperal Pyrexia	2	8	— 6
Pneumonia	6	12	— 6
Acute Anterior Poliomyelitis	—	4	— 4
Erysipelas	7	9 (15)	— 2
Undulant Fever	1	—	+ 1
Cerebro-spinal Fever	1	—	+ 1
Malaria	—	—	0
Dysentery	{ 13† 1‡	12	+ 2
Ophthalmia Neonatorum ...	—	1	— 1
Encephalitis Lethargica ...	—	—	0
Measles	17	450 (454)	— 433
Whooping-cough	69	49 (50)	+ 20
Totals	177	629	— 552

* Where the numbers compiled in my department differ from those supplied by the Registrar-General, both are given, the Registrar-General's being shown (-)

† Sonné. ‡ Bacillary.

SMALLPOX.

No case of smallpox occurred in the District, although cases from outside the District were treated in the Smallpox Hospital at East Clandon. A number of contacts of cases in this small outbreak came into the District and all were followed up, the usual precautions being taken, including vaccination where this had not been done recently.

SCARLET FEVER.

Scarlet fever continues to be a source of difficulty. Fifty-eight cases were notified, a number of them being in institutions. There was no large outbreak. Practically all of the cases were of a very mild type. The number of notifications does not give a true picture of the position, since only typical scarlet fever cases were notified as a general rule. There were a number of outbreaks of infectious sore throat due to hæmolytic streptococci and such cases are probably as infectious as typical scarlet fever and of the same nature. Many of them have no rash, and others a very mild or atypical rash. Notification depends entirely upon the opinion of the doctor in attendance, and, as a general rule, there is reluctance to notify unless the rash is typical or special conditions exist, such as risk to milk supplies.

The name "scarlet fever" is really becoming obsolete, and it would be better if the term "hæmolytic streptococcal infection" was substituted. The disease being very mild, and the infection, as a rule, widespread, there is very little justification in removal to Isolation Hospital unless exceptional circumstances are found. Efforts are made to treat most cases at home, and, although medical practitioners are willing to co-operate in this, the general public are apt to regard scarlet fever as seriously as in bygone years and to expect hospital treatment. Difficulties of home isolation and home nursing are often insurmountable.

DIPHTHERIA.

Two cases were notified, neither of them having been immunised against diphtheria. One "carrier" in addition to these two cases was removed to isolation hospital, since it was found in a children's hostel.

DIPHTHERIA IMMUNISATION.

During the year 123* children were immunised. Schick testing was done in 59 cases, only one of them being slightly positive. 54 visits were made to schools, and in the following schools every child has been successfully immunised :

Glenesk House, East Horsley.

Glengarden, West Clandon.

Weston School, Albury Rectory.

St. Michael's, Southfields	} evacuated to Cooke's
St. Mary's, Westminster		Place, Albury.

Compton C. of E. School.

* In addition nine children received re-immunising treatment.

The total number of children in the District is 3,659 under five years of age and 5,002 between the ages of 5-15 years. The total number now immunised is 969 under five years of age, and 4,476 between 5 and 15 years. Converted into percentages these figures give rates of 89.48 per cent. between the ages of 5 and 15 years, but only 26.48 per cent. of those under 5 years.

This latter figure is unsatisfactory and disappointing. Considerable efforts have been made to improve the position by public advertisement, appeals to parents on the children's first birthday, and appeals to medical practitioners throughout the District.

With children of school age personal contact is established through their attendance at schools. There is nothing analogous for the pre-school children, except in the Infant Welfare Centres, which are attended by a relatively small proportion of the children in the District. Children attending the Centres are on the whole well enough done, but there is no direct contact with the others who, because of the distances or for other reasons, do not attend any Infant Welfare Centres. Health Visitors and District Nurses have been asked to assist so far as they can, but despite all our efforts the figure remains unsatisfactory. The only remedy appears to be direct personal approach to the parents and there are good grounds for recommending the appointment of a nurse for this special purpose.

It should be noted that the percentage is worked out on the actual number of children in the District, and not on the records supplied by the Registrar-General, which refer to children permanently resident in the District only. It is certain that some children have been immunised before coming into the Guildford Rural District, and a considerable number are done privately by their own doctors. There is no accurate information about these. The percentage of 26.48 per cent. is therefore a minimum, but making every allowance it cannot be considered that we have succeeded in immunising a satisfactory number of children under 5 years of age.

MEASLES.

There were only 17 cases of measles, and no occasion was found to maintain a stock of convalescent measles serum. It will be remembered that a few years ago suitable convalescent measles cases were invited to give a supply of blood for the preparation of measles convalescent serum. This scheme would still be available during epidemics for the protection of weakly children whose lives might be endangered by the development of measles.

FOOD POISONING.

Several small outbreaks of mild food poisoning were reported. In almost every case these were apparently due to cooked meat or meat preparations. None of them were serious, and in most cases, no doubt for that reason, information was not received until it was too late to make adequate investigations.

UNDULANT FEVER.

One case was notified at East Horsley, and enquiries confirmed that there had been several other cases about the same time. These apparently originated from the milk supplied from one particular farm where abortus fever had been present in the herd for a considerable time.

A thorough investigation of all cattle was undertaken with the willing co-operation of the owner, and the infected milk withdrawn. Abortus fever is apparently by no means uncommon amongst dairy herds in this District, and it is perhaps surprising that so little human infection results.

It would be an advantage if the Local Authority was informed of infected herds from which raw milk is supplied to the public. In this particular instance, for example, a very great deal of investigation was necessary before it could be traced to its origin, with consequent delay in dealing with the infected milk.

The Ministry of Agriculture Veterinary Inspectors are usually aware of the existence of the disease, but there is no arrangement for passing on the information to the Public Health Authorities.

SCHOOL ABSENTEES.

The following table shows the number of children absent from school suffering, or suspected to be suffering, from any infectious or contagious disease, including contacts with cases of infectious disease.

TABLE V. SCHOOL ABSENTEES, 1944.

	Scarlet Fever	Diphtheria	Chicken-pox	Measles	German Measles	Impetigo	Ringworm	Mumps	Whooping-cough	Scabies	Totals
Albury C. of E.	4	—	—	—	—	—	—	—	—	—	4
and Evacuees... ..	—	—	1	—	—	—	—	—	—	—	1
Ash Common C. of E.	—	—	—	—	—	—	—	—	—	—	—
and Evacuees... ..	—	—	—	—	—	—	—	—	—	—	—
Ash Vale Council	—	—	—	—	—	—	—	—	—	—	—
Victoria Hall, Ash	—	—	—	—	—	—	—	—	8	—	8
Ash Walsh C. of E.	—	—	—	—	—	—	—	—	—	—	—
Ash Wyke	—	—	—	—	—	—	—	—	—	—	—
Artington Evacuated	—	—	—	—	—	—	—	—	—	—	—
Chilworth C. of E.	—	—	—	—	4	—	—	—	13	—	17
and Evacuees... ..	—	—	—	—	—	—	—	—	—	—	—
Clandon, East, C. of E.	—	—	—	—	1	—	—	—	—	—	1
Clandon, West, C. of E.	—	—	—	—	—	—	—	—	—	—	—
and Evacuees... ..	—	—	—	—	—	—	—	—	—	—	—
Compton C. of E.	—	—	—	—	—	—	—	—	—	—	—
Effingham Council	—	—	—	—	—	—	—	—	—	—	—
and Evacuees... ..	—	—	—	—	—	—	—	—	—	—	—
Holmbury St. Mary	—	—	—	—	—	—	—	—	—	—	—
and Evacuees... ..	—	—	—	—	—	—	—	—	—	—	—
Holmbury St. Mary C. of E.	—	—	—	—	—	—	—	—	—	—	—
Horsley, East, C. of E.	—	—	—	—	—	—	—	—	—	—	—
Horsley, West, C. of E.	—	—	1	—	—	—	—	—	—	—	1
and Evacuees... ..	—	—	—	—	—	—	—	—	—	—	—
Ockham C. of E.	—	—	—	—	—	—	5	—	—	—	5
Peaslake C. of E.	—	—	—	—	—	1	—	—	4	—	5
and Evacuees... ..	—	—	—	—	—	—	—	—	—	—	—
Pirbright Council	2	—	—	1	7	—	—	—	—	—	10
Puttenham C. of E.	5	—	—	1	—	3	—	—	5	—	14
Ripley C. of E.	4	—	47	—	21	—	—	—	14	3	89
and Evacuees... ..	—	—	—	—	—	—	—	—	—	—	—
Seale C. of E.	—	—	—	—	—	—	—	—	5	—	5
Send C. of E. (J.M. & Infants)	5	—	16	2	12	—	—	—	2	—	37
and Evacuees... ..	—	—	—	—	—	—	—	—	—	—	—
Shackleford C. of E.	—	—	—	—	—	—	—	—	—	—	—
Shalford Mixed	3	—	5	—	—	—	—	—	—	—	8
and Evacuees... ..	—	—	—	—	—	—	—	—	—	—	—
Shalford Council Infants	—	—	—	—	—	—	—	—	7	—	7
and Evacuees... ..	—	—	—	—	—	—	—	—	—	—	—
Shere C. of E.	1	—	—	—	—	—	—	—	7	1	9
Tongham C. of E.	—	—	—	—	—	—	—	—	10	—	10
Wanborough Council	—	—	—	—	—	—	—	1	2	—	3
Wood Street Council	8	—	—	—	3	—	—	—	—	—	11
and Evacuees... ..	—	—	—	—	—	—	—	—	—	—	—
Worplesdon, Perry Hill Council	6	—	2	—	—	—	—	3	—	—	11
and Evacuees... ..	—	—	—	—	—	—	—	—	—	—	—
Totals	38	—	72	4	48	4	5	4	77	4	256

TABLE VI.
INFECTIOUS DISEASE, 1944. AGE INCIDENCE.
(Other than Tuberculosis.)

NOTIFIABLE	At all Ages	At Ages—Years.									Cases Admitted to Hospital	Total Deaths
		under 1	1-5	5-10	10-15	15-20	20-30	30-40	40-50	50-60			60 and Over
Measles	17	—	9	5	2	1	—	—	—	—	8	—
Scarlet Fever	58	—	13	28	9	3	2	1	—	—	37	—
Puerperal Pyrexia	2	—	—	—	—	—	1	1	—	—	1	—
Diphtheria	2	—	1	—	—	1	—	—	—	—	2	—
Whooping-cough	69	4	39	20	2	—	1	1	2	—	7	1
Typhoid	—	—	—	—	—	—	—	—	—	—	—	—
Sonné Dysentery	13	2	3	1	1	6	—	—	—	—	7	—
Bacillary Dysentery	1	—	—	1	—	—	—	—	—	—	1	—
Influenzal Pneumonia	6	1	2	—	—	—	—	—	1	2	3	—
Undulant Fever	1	—	—	1	—	—	—	—	—	—	—	—
Erysipelas	7	—	—	—	—	—	1	3	—	1	—	—
Cerebro-Spinal Meningitis	1	—	—	—	—	—	—	—	—	—	—	—
Totals	177	7	67	56	14	11	6	7	4	3	69	1

TABLE VII. INCIDENCE OF NOTIFIED INFECTIOUS DISEASE (other than Tuberculosis)
PARISH BY PARISH.

NOTIFIABLE DISEASE 1944	Parish																Total						
	Albury	Artington	Ash & Normandy	Clandon, East	Clandon, West	Compton	Effingham	Horsley, East	Horsley, West	Ockham	Pirbright	Puttenham	Ripley	St. Martha	Seale	Send		Shackelford	Shalford	Shere	Wanborough	Wisley	Worplesdon
Bacillus Dysentery ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Smallpox ...	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Scarlet Fever ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Diphtheria ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Enteric Fever (including Paratyphoid)	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Puerperal Pyrexia ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Pneumonia ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Acute Anterior Poliomyelitis	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Erysipelas... ..	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Undulant Fever ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Cerebro-Spinal Fever	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Malaria	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Sonné Dysentery ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Ophthalmia Neonatorum	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Encephalitis Lethargica	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Typhoid	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Measles	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Whooping-cough ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Totals	3	6	18	3	1	1	14	16	9	—	6	14	7	2	21	16	—	9	11	—	—	20	177

CANCER.

There were 75 deaths from malignant disease during 1944 : 42 male and 33 female. The age incidence of these persons is shown in the table below :

DEATHS FROM CANCER

Site	Under 20		20-30		30-40		40-50		50-60		60-70		70-80		Over 80		Totals		Grand Totals	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1944	1943
Alimen- tary ...	-	-	-	-	1	-	1	4	4	2	5	3	9	4	2	4	22	17	39	48
Breast ...	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1	9
Lung ...	-	-	-	-	-	1	-	-	2	-	2	-	2	-	-	-	6	1	7	3
Liver ...	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	1	2	1	3	3
Tongue	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other ...	1	-	-	-	-	-	1	2	2	3	3	2	6	4	-	1	12	13	25	23
1944	1	-	-	-	1	1	2	6	8	5	10	5	19	9	2	6	42	33	75	86

The following table shows the deaths from cancer during the last fifteen years :

DEATHS FROM CANCER DURING THE LAST FIFTEEN YEARS.

Year			Male	Female	Total	Death-Rate
1930	...	...	19	14	33	1.51
1931	...	...	9	22	31	1.27
1932	...	...	16	23	39	1.45
*1933	...	...	21	22	43	1.32
1934	...	...	27	19	46	1.45
1935	...	...	30	34	64	1.95
1936	...	...	33	23	56	1.73
1937	...	...	28	31	59	1.75
1938	...	...	25	25	50	1.42
1939	...	...	28	37	65	1.62
1940	...	...	19	41	60	1.58
1941	...	...	30	42	72	1.75
1942	...	...	29	41	70	1.79
1943	...	...	38	55	93	2.47
1944	...	...	42	33	75	1.98

*Extension of boundary, 1st April, 1933.

TUBERCULOSIS.

The following table shows the number and types of cases on the Register at 31st December, for the last 12 years :

Year	Pulmonary		Non-Pulmonary		Total Number on Register at 31st December
	Male	Female	Male	Female	
1933 ...	60	44	33	26	163
1934 ...	58	39	40	26	163
1935 ...	52	38	36	25	151
1936 ...	56	35	26	24	141
1937 ...	52	45	24	25	146
1938 ...	56	36	21	27	140
1939 ...	58	48	21	28	155
1940 ...	75	52	21	36	184
1941 ...	82	57	27	39	205
1942 ...	85	64	30	45	224
1943 ...	90	61	33	32	216
1944 ...	101	70	37	60	268

During 1944 there were 61 new cases (primary and others). They were distributed in the following parishes :

Albury	2	Puttenham	3
Artington	—	Ripley	5
Ash and Normandy ...	15	St. Martha	—
Clandon, East	1	Seale	3
Clandon, West	2	Send	4
Compton	2	Shackleford	2
Effingham	5	Shalford	—
Horsley, East	2	Shere	2
Horsley, West	4	Wanborough	1
Ockham	2	Wisley	—
Pirbright	3	Worplesdon	3

Table VIII on page 42 shows the new cases and deaths in age periods ; pulmonary and non-pulmonary figures are given separately.

The following table shows the notification and deaths in the District, with the corresponding rates per 1,000 of the population, during the past 10 years.

Year	Cases Notified	Notification Rate	Deaths	Death-Rate per 1,000 of the Population
1934 ...	37	1.14	9	0.28
1935 ...	25	0.76	16	0.49
1936 ...	35	1.08	13	0.40
1937 ...	43	1.26	18	0.54
1938 ...	43	1.23	16	0.46
1939 ...	45	1.22	10	0.25
1940 ...	59	1.39	17	0.45
1941 ...	49	1.11	12	0.29
1942 ...	53	1.36	22	0.56
1943 ...	63	1.67	22	0.53
1944 ...	61	1.61	9	0.24

TUBERCULOSIS CARE COMMITTEE.

The work of this Committee has continued. During the year, 26 cases were considered by the Committee, 22 of which were given assistance. In 15 cases this took the form of the supply of free milk, in one the payment of fares and pocket money, in another the provision of clothing and milk, in another the provision of clothing alone, and in three the supply of bedding and free milk. The expenditure involved during the year by these grants was £125 3s.1d. In addition, donations were made to the Holiday Fund and the Samaritan Fund of the Standing Conference of the Surrey Tuberculosis Care Committees.

£65 13s.10d. was raised by the sale of Christmas Seals.

The Care Committee had a balance of £81 9s. at 31st December, 1944.

TABLE VIII. NEW CASES AND MORTALITY OF TUBERCULOSIS.

Age Periods	New Cases*				Deaths†			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	Male	Female	Male	Female	Male	Female	Male	Female
0—1	—	—	—	—	—	—	—	—
1—5	—	—	—	—	—	—	—	—
5—15	5	1	4	4	—	—	—	—
15—25	6	5	—	1	—	—	—	—
25—35	3	6	1	2	1	2	—	—
35—45	6	6	—	2	1	—	—	—
45—55	3	1	—	1	1	—	—	—
55—65	—	1	—	—	1	—	—	—
65 and over	—	3	—	—	1	4	—	—
Unknown	—	—	—	—	—	—	—	—
Totals	23	23	5	10	5	6‡	—	—

* Thirty-eight of these were primary notifications, 18 were persons from other areas who had come to reside in the Guildford Rural District during the year, and 5 were cases notified after death (i.e. from Death Returns, etc.).

† The ratio of non-notified tuberculosis deaths to total tuberculosis deaths was 2 in 11, or 1 in 5.5.

‡ Two of these deaths actually occurred in 1943.

SANITARY INSPECTOR'S ANNUAL REPORT

*To the Chairman and Members of the Guildford
Rural District Council.*

Mr. Chairman, Ladies and Gentlemen,

I beg to submit my Annual Report upon the work carried out by your Health Department during the year ended December 31st, 1944.

The total number of inspections made during the year was 2,205, and the following table shows the number and nature of inspections made :

Visits <i>re</i> Nuisances	...	...	...	...	...	...	...	...	...	339
Visits <i>re</i> Water Supplies	...	...	...	...	...	...	...	...	...	104
Visits to Cowsheds and Dairies	...	...	...	...	...	...	...	...	...	155
Visits to Factories and Workshops	...	...	...	...	...	...	...	...	...	28
Visits to Bakehouses	...	...	...	...	...	...	...	...	...	10
Visits to Slaughter-houses and Butchers' Shops	...	...	...	...	...	...	...	...	...	57
Visits to Shops	...	...	...	...	...	...	...	...	...	93
Visits to Tents, Vans and Sheds	...	...	...	...	...	...	...	...	...	64
Visits to Knackers' Yards	...	...	...	...	...	...	...	...	...	7
Visits to Shops (Shops Acts)	...	...	...	...	...	...	...	...	...	41
Visits to Refuse Tips	...	...	...	...	...	...	...	...	...	17
Inspections under Section 5 of the Housing Act, 1936	...	...	...	...	...	...	...	...	...	101
Re-inspections (Houses)	...	...	...	...	...	...	...	...	...	180
Drains Inspected	...	...	...	...	...	...	...	...	...	415
Applications for Council Houses investigated	...	...	...	...	...	...	...	...	...	6
Visits to Swimming Pools	...	...	...	...	...	...	...	...	...	—
Enquiries <i>re</i> Cases of Tuberculosis	...	...	...	...	...	...	...	...	...	56
Other Visits	...	...	...	...	...	...	...	...	...	301
Total										1,974

NOTICES.

Statutory Notices served	...	...	...	...	...	...	...	...	...	3
Preliminary Notices served	...	...	...	...	...	...	...	...	...	340
Statutory Notices complied with	...	...	...	...	...	...	...	...	...	1
Preliminary Notices complied with	...	...	...	...	...	...	...	...	...	293
Notices not complied with	...	...	...	...	...	...	...	...	...	26

SUMMARY.

Legal Proceedings	...	...	...	...	...	...	...	...	...	—
Milk Samples for Bacterial Examination	...	...	...	...	...	...	...	...	...	92
Water Samples for Analysis	...	...	...	...	...	...	...	...	...	25
Watercress Beds Samples	...	...	...	...	...	...	...	...	...	5
Infected Premises disinfected	...	...	...	...	...	...	...	...	...	36
Premises Disinfected for other causes	...	...	...	...	...	...	...	...	...	32
Houses cleansed	...	...	...	...	...	...	...	...	...	13
Nuisances from Cesspools abated	...	...	...	...	...	...	...	...	...	263
Chimney Stacks repaired or repointed	...	...	...	...	...	...	...	...	...	4
Ceilings replastered, repaired or renewed	...	...	...	...	...	...	...	...	...	17
Coppers provided or repaired	...	...	...	...	...	...	...	...	...	6
Dampness remedied	...	...	...	...	...	...	...	...	...	37
Doors repaired or renewed	...	...	...	...	...	...	...	...	...	20
Eaves Gutters and Downpipes repaired or renewed	...	...	...	...	...	...	...	...	...	28
Floors relaid or renewed	...	...	...	...	...	...	...	...	...	25
Hand Rails provided to Staircases	...	...	...	...	...	...	...	...	...	1
Internal Wall Plaster renewed or repaired	...	...	...	...	...	...	...	...	...	28
Roofs renewed or repaired	...	...	...	...	...	...	...	...	...	44
Cooking Ranges provided or repaired	...	...	...	...	...	...	...	...	...	7
Window Frames repaired or renewed	...	...	...	...	...	...	...	...	...	18
Yards and Paths repaired or repaved	...	...	...	...	...	...	...	...	...	—
New Drainage provided, repaired or reconstructed...	...	...	...	...	...	...	...	...	...	44
Cesspools provided	...	...	...	...	...	...	...	...	...	1
Ditches cleansed	...	...	...	...	...	...	...	...	...	14
Pail Closets renewed or repaired...	...	...	...	...	...	...	...	...	...	4
Water Closet Pedestals renewed or repaired	...	...	...	...	...	...	...	...	...	4
Wells cleansed or improved	...	...	...	...	...	...	...	...	...	5
Main Water supplied to Houses	...	...	...	...	...	...	...	...	...	5
New Dustbins provided	...	...	...	...	...	...	...	...	...	33
Roof Water Soakaways provided	...	...	...	...	...	...	...	...	...	9
Sub-floor Ventilation provided	...	...	...	...	...	...	...	...	...	12
Brickwork repointed	...	...	...	...	...	...	...	...	...	15
Lead Trapped Waste Pipes provided...	...	...	...	...	...	...	...	...	...	1
Burst Water Pipes repaired...	...	...	...	...	...	...	...	...	...	—
Approach to Cowsheds or Dairies improved	...	...	...	...	...	...	...	...	...	9
Buildings converted into Cowsheds	...	...	...	...	...	...	...	...	...	2
Cowshed Floors repaired	...	...	...	...	...	...	...	...	...	7
Structural Improvements to Dairies	...	...	...	...	...	...	...	...	...	6
Manure Accumulations removed	...	...	...	...	...	...	...	...	...	1
New Coolers provided	...	...	...	...	...	...	...	...	...	2
Structural Improvements to Cowsheds	...	...	...	...	...	...	...	...	...	10
New Drainage to Cowsheds	...	...	...	...	...	...	...	...	...	3
New Cowsheds constructed	...	...	...	...	...	...	...	...	...	1
New Dairies constructed	...	...	...	...	...	...	...	...	...	1
New Steam Sterilising Units	...	...	...	...	...	...	...	...	...	1
Additional Lighting to Cowsheds	...	...	...	...	...	...	...	...	...	6
Rats and Mice Nuisances abated	...	...	...	...	...	...	...	...	...	57
Cowsheds cleansed	...	...	...	...	...	...	...	...	...	15

REPORT ON THE ADMINISTRATION OF THE FACTORIES ACT, 1937.

1. Inspection of Factories, Workshops and Workplaces.

Premises	Number of		
	In- spections	Written Notices	Prosecu- tions.
FACTORIES (with mechanical power)	21	6	—
FACTORIES (without mechanical power)	—	—	—
OTHER PREMISES under the Act (in- cluding works of building and engineering construction but not including outworkers' premises) ...	—	—	—
Total	21	6	—

2. Defects Found in Factories, Workshops and Workplaces.

Particulars	Defects Found	Defects Remedied
SANITARY CONVENIENCES (unsuitable or defective)	12	12
OTHER OFFENCES	—	—
Total	12	12

MEAT AND OTHER FOODS.

There has been no change in the number of slaughter-houses during the year which are now licensed annually.

Albury	...	...	...	...	...	...	1
Ash	...	...	...	...	...	...	4
East Horsley	...	...	...	...	...	...	1
Puttenham	...	...	...	...	...	...	1
Ripley	...	...	...	...	...	...	1
Shalford	...	...	...	...	...	...	2
Shere	...	...	...	...	...	...	2
Tongham	...	...	...	...	...	...	1

Due to centralised slaughtering the above slaughterhouses have had little or no use.

CESSPOOL EMPTYING.

The Council undertake the work of cesspool emptying free of charge throughout the District and for this purpose employ seven Dennis motor vehicles of the vacuum type. This work increases year by year as it is found that when once the Council undertake this service the occupier is not willing to carry out any work himself.

Due to the increased population and the requirements of the Military Authorities in the area, all the machines have been working overtime throughout the year. The practice is for the Council to carry out the work on demand of the occupier generally once each quarter, but more frequent emptyings are carried out where the nature of the sub-soil or special conditions are such that the work becomes necessary in order to avoid a nuisance.

Dumping of the contents of the machines is either on to the existing Sewage Outfall Works or more frequently on to farm land to be ploughed in. The Council rent suitable land as tips but it is becoming increasingly difficult to provide an adequate tip, which, while removed from any built-up area, is sufficiently near to permit of an efficient service.

SCAVENGING.

Emptying of Pail Closets.—Pail closets are emptied in the parish of Ash, the Tongham area of the parish of Seale, and certain areas in the parishes of Shalford, St. Martha, and Albury. The work is undertaken by direct labour, the pails being emptied twice weekly, the work for the most part being carried out at night and the method of collection is by means of special tanks fitted in the refuse vehicles. The contents of the pails are disposed of by ploughing in on suitable land. Complaints have been received during the year but this is unavoidable and the scheme in operation can only be described as temporary, pending the provision of a scheme of main drainage to serve the areas affected.

REFUSE COLLECTION AND SALVAGE.

The Council undertake by direct labour the periodical collection of refuse from the whole of the District. Part of the area is given a fortnightly collection, while in the more rural areas the collection is monthly. Prior to the war a more frequent collection was carried out, but due to the shortage of labour this work had to be curtailed. The less frequent collection, however, has not resulted in less work being undertaken and the Council employ five Dennis covered Refuse Freighters for this work. In addition to the collection of refuse, salvage work is active throughout the District and includes the collection and baling of waste paper, collection and sorting of bottles, rags, etc., and also the collection of metals, including

the baling of tins. All the materials have found a ready sale during the year and the total sales have amounted to £3,153 4s.9d.

The refuse is disposed of by controlled tipping at Stonebridge, Shalford and Stratford Road, Ash.

SEWERAGE AND SEWAGE DISPOSAL.

The Sewage Disposal Works in connection with the North Eastern Area Sewage Scheme, which scheme has been completed since the war, has given a first-class effluent throughout the year ; additional properties have been connected to the sewers during the year and there are at the moment some 1,960 properties connected to the sewers. Very few properties in the parish of Send are connected to the sewers, this being due to the non-completion of a short length of sewer which would permit the whole of the parish of Send being connected. It is hoped during the coming year that this work will be completed.

Other districts provided with main drainage are Shere and Gomshall, with separate Disposal Works at Shere, and the parish of Shalford draining into the sewers of the Guildford Corporation. A small area in the parish of Worplesdon also drains to the Borough of Guildford.

With regard to the Shere and Gomshall sewers, some 100,000 gallons per day of tannery effluent is dealt with at the Shere Works, which occasionally leads to overloading, both of the sewers and the disposal works. The Council, however, are aware of this and have proposed as soon as the circumstances permit to lay a trunk sewer through the Tillingbourne Valley to convey this sewage to Shalford, and thence into the sewers of the Guildford Corporation.

The North Western area of the District is proposed to be served by a major scheme of sewerage which was submitted to the Ministry of Health before the war. The necessity of the scheme is constantly before the Council. Due to pressing local needs a small area at Ash has been sewered and temporary disposal works constructed to deal with that area, and it is intended that this small scheme shall be embodied in the major scheme referred to. The scheme has proved of great benefit and has obviated what was a frequent nuisance from overflowing cesspools.

